ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
		100	ALV ID
FEE DETERMINATION		02001	950 W
O.I.P.E. CLASSIFIER		137	4/n
FORMALITY REVIEW	RT	515	16/05-00
RESPONSE FORMALITY REVIEW	Teauest	925	04-05-01

INDEX OF CLAIMS

J	Rejected	N	Non-elected
	Allowed	- 1	Interference
	(Through numeral) Canceled		Appeal
	Restricted	0	Objected

Claim Date	Claim Date	Claim Date
	Final	Original
1 i i i i i i i i i i i i i i i i i i i	Original Original	
	51	101
2 1	52	102
3 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	53	103
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12	62	112
13 / /	63	113
(19)	64	114
15	65	115
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17	67	117
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24	74	124
" 25	75	125
26	76	126
27	77	127
28	78	128
29	79	129
30	80	130
31	81	131
32	82	132
33	83	133
34	84	134
35	85	135
36	86	137
37	87	↓
38	88	138
39	89	139
40	90	140
41 .	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50 .	100	150

If more than 150 claims or 10 actions staple additional sheet here

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